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S.D. SEC. OF STATE

STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation

| | | |
|--|---|---|
| 1. TITLE OF NEWSPAPER <u>Alcester Union/Hudsonite</u> | | 2. DATE <u>9/26/19</u> |
| 3. FREQUENCY OF ISSUE <u>weekly</u> | 3A. NO. OF ISSUES PUBLISHED ANNUALLY <u>52</u> | 3B. ANNUAL SUBSCRIPTION PRICE \$ <u>30</u> / # <u>35</u> |
| 4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) <u>PO Box 227, Alcester, Union, SD 57001</u> | | |
| 5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) <u>PO Box 227 110 E. 1st St., Alcester, SD 57001</u> | | |
| 6. FULL NAME OF PUBLISHER: <u>Allyson Hill 1000 Washington St. Centerville SD</u> | | |
| 7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.) | | |
| FULL NAME <u>Allyson Hill</u> | | COMPLETE MAILING ADDRESS <u>1000 Washington St. Centerville SD 57001</u> |
| 8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.) | | |

| 9. EXTENT AND NATURE OF CIRCULATION | AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS | ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE |
|---|--|---|
| A. TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies) | <u>475</u> | <u>475</u> |
| B. PAID AND/OR REQUESTED CIRCULATION | | |
| 1. Sales through dealers and carriers, street vendors, and counter sales. | <u>60</u> | <u>70</u> |
| 2. Mail Subscription (Paid and or requested) | <u>230</u> | <u>280</u> |
| 3. Paid Electronic Copies | <u>0</u> | <u>0</u> |
| C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.) | <u>290</u> | <u>350</u> |
| D. FREE DISTRIBUTION | | |
| 1. BY MAIL, CARRIER OR OTHER MEANS | <u>22</u> | <u>22</u> |
| 2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES | <u>0</u> | <u>0</u> |
| E. TOTAL DISTRIBUTION (Sum of C, D1 and D2) | <u>312</u> | <u>372</u> |
| F. COPIES NOT DISTRIBUTED | | |
| 1. Office use, left over, unaccounted, spoiled after printing | <u>163</u> | <u>103</u> |
| 2. Return from News Agents | | |
| G. TOTAL (Sum of E, F1 and F2 - Should equal total shown in A.) | <u>475</u> | <u>475</u> |

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public

I swear that the statements made by me are true, correct, and complete:

Allyson Hill
(Signature)

owner

(Title)

State of South Dakota)

County of Clay)

(Seal)

DEBORAH J. CHRISTENSEN
Seal
Notary Public
South Dakota

Form SCS-R 051 9/2016

Sworn to before me this 20th day of Sept, 2019

Deborah J. Christensen
Notary Public

My commission expires: Oct 30, 2024